PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

03378/LH

CLAIMS AS FILED - PART I (Column 1)						(Column 2)		SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			22				F	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			Q 2 minus 20=		* ~		>	(\$ 9=		OR	X\$18=	36
INDEPENDENT CLAIMS			minus 3 =				\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	K 42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT							+	140=		OR	+280=	
* If the difference in column 1 is less than zero, enter					"0" in c	column 2	T:	OTAL		OR	TOTAL	786
CLAIMS AS AMENDED - PART II											OTHER	THAN
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST							MALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	· · · · · · · · · · · · · · · · · · ·	=	×	(\$ 9=		OR	X\$18=	
	Independent	*	L	Minus *** JLTIPLE DEPENDENT		=	>	(42=		OR	X84=	
<u> </u>	FINOT FNESE	INTATION OF IM	OCTIPLE DEF	PENDEN	CLAIM		+	140=		OR	+280=	
							455	TOTAL		OR	TOTAL	
		(Column 1)		(Colur	nn 2)	(Column 3)	ADL	OIT. FEE		1	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	EST BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	×	(\$ 9=		OR	X\$18=	
	Independent			CLAIM	=	×	(42=	• .	OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								140=		OR	+280=	
								TOTAL IT. FEE	,	OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colui		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	×	\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	X	(42=		ΛP	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDEN									OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								140=		OR	+280=	1
	If the entry in colu	mn 1 is less than t	he entry in colu	ımn 2 write	. "O" in co	lumn 3	L					
**	If the "Highest Nu	mn 1 is less than t mber Previously P imber Previously P	aid For" IN THI	S SPACE	s less tha	ın 20, enter "20."	ADD	TOTAL IT. FEE		OR	TOTAL ADDIT. FEE	